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PATENT APPLICATION FEE DETERMINATION RECORD

Substitute for Form PTO-875

Application or Docket Number

00014.01R

APPLICATION AS FILED – PART I

(Column 1)

(Column 2)

SMALL ENTITY

OR

OTHER THAN
SMALL ENTITY

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE (37 CFR 1.16(a), (b), or (c))		
SEARCH FEE (37 CFR 1.16(k), (l), or (m))		
EXAMINATION FEE (37 CFR 1.16(o), (p), or (q))		
TOTAL CLAIMS (37 CFR 1.16(i))	134 minus 20 =	• 114
INDEPENDENT CLAIMS (37 CFR 1.16(h))	13 minus 3 =	• 10
APPLICATION SIZE FEE (37 CFR 1.16(s))	If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))		

RATE (\$)	FEE (\$)
X =	
X =	
N/A	
TOTAL	

RATE (\$)	FEE (\$)
X =	
X =	
N/A	
TOTAL	

* If the difference in column 1 is less than zero, enter "0" in column 2.

APPLICATION AS AMENDED – PART II

(Column 1)

(Column 2)

(Column 3)

SMALL ENTITY

OR

OTHER THAN
SMALL ENTITY

AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total (37 CFR 1.16(i))	* 76	Minus	** 134	= 0
	Independent (37 CFR 1.16(h))	* 13	Minus	*** 13	=
	Application Size Fee (37 CFR 1.16(s))				
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))				

RATE (\$)	ADDI- TIONAL FEE (\$)
X =	
X =	
N/A	
TOTAL ADD'L FEE	

RATE (\$)	ADDI- TIONAL FEE (\$)
X =	
X =	
N/A	
TOTAL ADD'L FEE	

(Column 1)

(Column 2)

(Column 3)

AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total (37 CFR 1.16(i))	* 61	Minus	** 134	= 0
	Independent (37 CFR 1.16(h))	* 4	Minus	*** 13	= 0
	Application Size Fee (37 CFR 1.16(s))				
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))				

RATE (\$)	ADDI- TIONAL FEE (\$)
X =	
X =	
N/A	
TOTAL ADD'L FEE	

RATE (\$)	ADDI- TIONAL FEE (\$)
X =	
X =	
N/A	
TOTAL ADD'L FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

37 CFR 1.8

CERTIFICATE OF MAILINGI hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to:
Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on July 12, 2005.

Signature:

Name: Tracy E. Crispino